

2011 INTEGRATION FORUM

NP Healthcare –
An Innovative Model of
Healthcare that
Integrates Physical and
Mental Health Services

ASU College of Nursing and Health Innovation



NP Healthcare – Downtown Phoenix

Integration of mental healthcare into primary care

NURSE MANAGED HEALTH CENTER

PAMELA LUSK, DNP, RN, PMHNP-BC PSYCHIATRIC & MENTAL HEALTH NURSE PRACTITIONER NP HEALTHCARE - DOWNTOWN



Nurse Practitioners

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FAMILY NURSE PRACTITIONER FNP
PSYCHIATRIC & MENTAL HEALTH NURSE PRACTITIONER
PMHNP



Nurse Practitioners

NP'S - FASTEST GROWING GROUP OF PRIMARY CARE PROVIDERS

NOW BEING PREPARED WITH A DOCTOR OF NURSING PRACTICE (DNP)

FINDINGS FROM SEVERAL STUDIES AND NCQA QUALITY REVIEW INDICATE THAT NP PRACTICE MEETS OR EXCEEDS THE STANDARD OF CARE

CONSUMERS ARE SATISFIED WITH NP CARE AND FIND IT TO BE HIGHLY PERSONALIZED WITH AN EMPHASIS ON HEALTH PROMOTION AND EDUCATION

AMERICAN COLLEGE OF NURSE PRACTITIONERS

Scope of Practice – PMHNP

Psychotherapy and Prescribing

AZ REGULATORY ENVIRONMENT IS FAVORABLE

FULL PRACTICE AUTHORITY FOR NPS

LICENSE: AZ RN, ADVANCED PRACTICE CERTIFICATE PRESCRIBING & DISPENSING CERTIFICATE

BOARD CERTIFICATION- ANCC

DEA# - NO RESTRICTIONS



Nurse managed health centers

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- Nurse managed health centers (NMHCs) are community based primary care clinics that provide a full range of health care services
- Include school based clinics, birthing centers, and wellness centers. Most are university owned; Provide student clinical experiences
- Primary care, as defined by IOM



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- 1 FTE FNP; .8 FTE PMHNP
- .5 FTE MD
- .4 FTE PhD counselor
- Faculty practice
- Students from nursing and other majors
- Integrated mental and physical healthcare
- Students, employees, and public
- Travel Health, clinical trials



NP Healthcare - Services

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HEALTH MAINTENANCE / PROMOTION

ILLNESS DIAGNOSIS/ MANAGEMENT

FAMILY PLANNING

IMMUNIZATIONS

MENTAL HEALTH EVALUATION/ MED-MANAGEMENT/ PSYCHOTHERAPY

OUTREACH



integration of mental health

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Examples from practice: consultation with PMHNP, PhD

- Puzzling presentation psychiatric evaluation
- Patient presents in acute crisis
- Patient comes to clinic with mental health concerns as chief complaint
- Inadequate response to 6 weeks of first line medication
- More than one psychotropic medication is indicated, comorbidities, antipsychotic medication, mood stabilizers are indicated
- Brief therapy as an adjunct to medical treatment



Integrated Health Care

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- Mental Health providers regularly consult with primary care provider— FNP: when physical concerns are a priority, or advice is needed about labs, contraindications of medications, etc.
- Electronic Health Records —shared records
- Reimbursement most insurance plans, Medicare, AHCCCS and NP Care Program Credentialing: E& M cpt codes FNP & MD on primary care panels PMHNP- behavioral panels

Evidence-based Practice

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Evidence-based practice is a "problem solving approach to the delivery of healthcare that integrates the best evidence from well —designed studies and patient care data and combines it with patient preferences and values and a clinician's expertise



Williams, S., O'Connor, E., Eder, M., & Whitlock, E. (2009). Screening for Child & Adolescent Depression in Primary Care Settings: A Systematic Evidence Review for the US Preventive Services Task Force. Pediatrics. 123 (4).



2009 USPSTF Recommends:

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STATE UNIVERSITY

Routine screening of all adolescents 12-18 years for MAJOR DEPRESSION in primary care

WHEN:

Systems are in place to ensure:

ACCURATE DIAGNOSIS

COGNITIVE-BEHAVIORAL OR

INTERPERSONAL PSYCHOTHERAPY

FOLLOW-UP

College of Nursing

 PHQ -9 recorded on EHR for <u>all</u> patients seen at NP Healthcare

- Beck Youth Inventories
- Mood Disorder Questionnaire
- Pediatric Symptom Checklist
- Vanderbilt Assessment Scales
- Hamilton Anxiety Scale



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SW Center for the Prevention and Treatment of Child and Adolescent Depression & Anxiety Disorders

Interventions with Outcomes Monitoring

- COPE (Creating Opportunities for Personal Empowerment) – CBT skills building treatment [Melnyk]
- Medication management
- Individual, group, family therapy



Outcomes:

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COPE - CBT delivered in 30 min sessions

Outcome measure	Pre- COPE T-score	Post- COPE T-score	Significance (2- tailed)
	mean.	Mean	
BYI – depression	58.33	46.13	.000 **
BYI – anxiety	55.00	49.40	.029 *
BYI – anger	54.87	45.87	.002 **
BYI- destruct. behav.	56.67	46.60	.006 **
BYI – self concept	39.60	54.07	.000 **
Personal Beliefs Scale	35.00	43.07	.001 **

Adolescents referred for depression – Mental Health Clinic n=15 **p<.01 *p<.05 Effect size, Cohen's D medium + +, small +

Challenges

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REIMBURSEMENT: 53% OF MANAGED CARE COMPANIES CREDENTIAL NP'S AS PRIMARY CARE PROVIDERS.
ONLY 56% REIMBURSE NP'S AT FULL USUAL CUSTOMARY RATE.

MORE PROVIDERS: WE NEED TO INVEST MORE \$ IN THE DUAL PREPARATION OF FAMILY, ADULT, & PEDIATRIC NP'S WITH A 2ND CERTIFICATION AS PSYCHIATRIC/MENTAL HEALTH NP'S- DEAN MELNYK



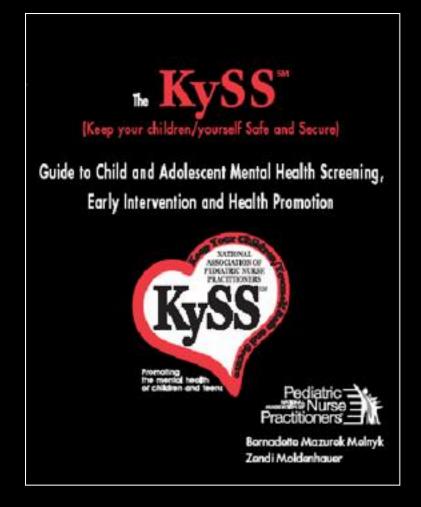
Workforce strategies

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- College of Nursing & Health Innovation –
 Strong nationally recognized Child/family and
 Adult Psychiatric MH NP programs that
 continue to grow and increase the number of
 mental health providers (23 current students).
- KySS guide (Melnyk, 2006) provides Child/Adolescent mental health screening, early intervention & health promotion tools (2nd ed planned)

Resource for primary care practices

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SCREENING TOOLS THAT CAN BE COPIED AND USED IN ANY PRACTICE

HANDOUTS FOR FAMILIES:
INFORMATION TO HELP
YOUNG PEOPLE DEAL WITH
COMMON CRISIS THEY FACE

INFORMATION RE: COMMON MENTAL HEALTH CONCERNS/ DIAGNOSIS IN CHILDHOOD AND ADOLESCENCE



College of Nursing Strategies

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HRSA FUNDED KYSS MENTAL HEALTH

FELLOWSHIP PROGRAM: PREPARES PRIMARY CARE PROVIDERS TO BETTER SCREEN FOR AND PROVIDE MANAGEMENT FOR COMMON LESS COMPLICATED MENTAL HEALTH PROBLEMS IN PRIMARY CARE. ONLINE, MENTOR FOR EACH FELLOW

Innovation with technology:

- Mental health telehealth for rural AZ being planned using new technologies
- IPAD screening tools in development with computer programmers

References

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